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Simultaneous fitting of the Minimal Model to IVGTT & Glucose Clamp Data

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Introduction

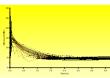
The minimal model of glucose kinetics developed by Bergman et al in 1979¹ has been extensively used to provide quantitative estimates of insulin sensitivity and glucose effectiveness in both healthy and diabetic subjects. it has previously been shown that the minimal model can be successfully fitted to data from an intravenous glucose tolerance test (IVGTT) and data from a glucose clamp experiment. Here is presented the findings of fitting the minimal model to IVGTT and clamp data alone and a novel approach of fitting the minimal model simultaneously to both IVGTT and clamp data.

Methods

IVGTT and Clamp Study

Data from a two-period euglycaemic clamp study performed in 28 healthy volunteers was used. An IVGTT was performed prior to the first clamp period during which 0.3 g/kg of a 20% glucose solution was administered. Blood samples were then taken at –15, -5, 0, 2, 4, 6, 10, 15, 20, 25, 30, 40 minutes and 1, 1.33, 2, 3 and 4 hours post glucose dose to measure the insulin and glucose concentrations. In each of the two clamp periods of the study, a single s.c. dose of 0.2 IU/kg Actrapid[®] was administered. Blood succes concentration was monitored every five minutes using HemoCue[®] measurements for the duration of the 8-hour clamp. Based on these glucose concentration measurements the amount of glucose to be infused to keep glucose to the clamp target value and this was determined using the manual clamping method. The measurement of blood glucose levels prior to treatment administration allowed the fasting blood glucose level of each individual, on each day of administration to be measured, this was used as the target clamp glucose concentration. Blood samples for the measurement of insulin and C-peptide were taken at 0, 0.25,0.5, 0.75, 1, 1.17, 1.33, 1.5, 1.67, 1.83, 2, 2.5, 3, 3.5, 4, 4.5, 5, 5.5, 6, 6.5, 7 and 8 hours post dose with time 0 being immediately prior to insulin administration no dosing day in each period. Blood samples taken at the above times were also measured in the laboratory for the blood glucose concentration in addition to the bedside HemoCue[®] glucose measurements.

The mean and individual glucose, insulin and GIR against time profiles from the IVGTT and clamps are shown in Figures 1-5.



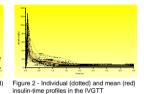
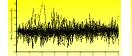


Figure 4 - Individual (dotted) and mean

(Actrapid[®] 1 – Red, Actrapid[®] 2 – Blue) GIRtime profiles for the two clamp periods

Figure 1 – Individual (dotted) and mean (red) alucose-time profiles in the IVGTT



 Individual (dotted) glucose from target-time for the two clamp

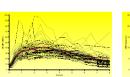


Figure 4 - Individual (dotted) and mean (Actrapid[®] 1 - Red, Actrapid[®] 2 - Blue) insulin-time profiles for the two clamp period

Minimal Model

The minimal model as presented by Vicini *et al*^p is shown in Figure 6 with its uniquely identifiable parameterisation described in Figure 7.

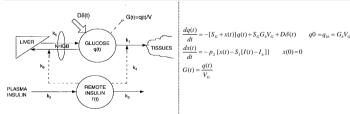


Figure 6 – Diagram of the Minimal Model

gure 7 – Equations of the Minimal Model

Where G_b is the basal plasma glucose concentration, I_b is the basal insulin plasma concentration, q is glucose mass, I(t) is insulin plasma concentration, G(t) is glucose plasma concentration, V_G the glucose volume of distribution, x and p_2 describe insulin action, $D\delta(t)$ is the dose of glucose. S_l describes the insulin sensitivity - the ability of insulin to enhance glucose disposal and inhibit glucose production. S_G describes the glucose effectiveness - the ability of glucose to stimulate glucose disposal and inhibit endogenous glucose production. NHGB refers the net hepatic glucose balance.

Data fitting Methods and Fisher Information Matrix (FIM)

Model fitting and minimal model parameter values were estimated using the first order estimation method in NONMEM®. Four parameters were estimated S₁, S₆, V₆ & p₂. Φ_{5} and I_{8} along with the observed insulin concentrations were supplied in the dataset. The NONMEM® estimates were used to compute the FIM for the fixed effect parameters (S₁, S₆, V₆ & p₂) using Matlab[®].

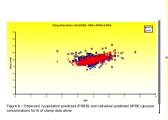
Results

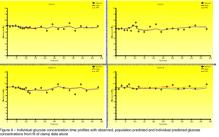
Parameter estimates are presented in Table 1 for fitting of the minimal model to the three types of data: IVGTT alone, clamp alone and IVGTT & clamp together. Plots of observed glucose concentrations versus population and individual predictions and time are presented in Figures 8 & 9 for the clamp only data and in Figures 10 & 11 for the simultaneous fit of IVGTT and clamp data. Parameter estimates for the simultaneous fit of IVGTT and Period 1 clamp data were used to predict the glucose concentrations for the second clamp period. Figure 12 shows some individual observed and predicted Period 2 glucose concentrations. Results from the FIM are presented in Table 2.

Table 1 – Results of fitting the minimal model to IVGTT, clamp and both IVGTT and clamp data

Minimal Model Parameter	Population Parameter Estimate (CV%)				
	IVGTT alone	Clamp alone	Simultaneous IVGTT & Clamp		
			Period 1 Clamp Data	Period 2 Clamp Data	
S ₁ (min ⁻¹ per mU.L ⁻¹)	NC	0.000439 (26.7)	0.00134 (12.4)	0.00107 (17.1)	
S _G (min ⁻¹)	NC	0.0568 (14.7)	0.0183 (10.7)	0.0120 (16.5)	
V _G (L/kg)	NC	0.472 (32.6)	0.164 (6.0)	0.171 (3.0)	
p ₂ (min ⁻¹)	NC	0.0170 (20.4)	0.0138 (17.0)	0.0180 (22.3)	

Clamp only data





IVGTT & Clamp Simultaneous data

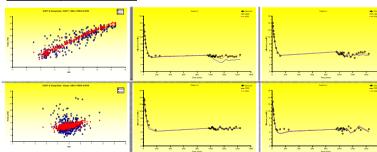


Figure 10 – Observed v population predicted (PRED) and individual predicted (IPRE) glucose concentrations for fit of IVGTT & clamp data

Prediction of Period 2 glucose clamp data

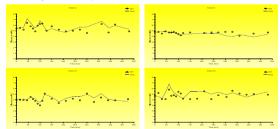


Figure 12 – Observed and predicted glucose concentrations for clamp Period 2 with concentrations predi using parameter estimates from fitting of Period 1 IVGTT and Clamp data

Fisher Information Matrix

Table 2 - Results of the Fisher Information Matrix

Type of Data	Minimal Model Parameter CV%				
Type of Data	VG	S _G	Sı	p 2	
IV GTT alone	1.045	9.606	42.970	46.456	
Clamp alone (insulin times)	1.721	10.314	5.506	11.217	
Clamp alone (Hemacue® times)	0.784	2.660	2.177	3.247	
Simultaneous (IVGTT and Clamp)	0.437	0.892	1.655	0.958	

Conclusion

 As indicated by the FIM, minimal model parameters were estimable from fitting to clamp data alone and by simultaneous fitting to both IVGTT and clamp data. Fitting of IVGTT alone was not successful as the parameters SI and p2 were unidentifiable, again as indicated by the FIM.
Addition of the IVGTT data to the clamp data stabilised the fitting with reliable and consistent parameter

estimates obtained from the simultaneous fit